

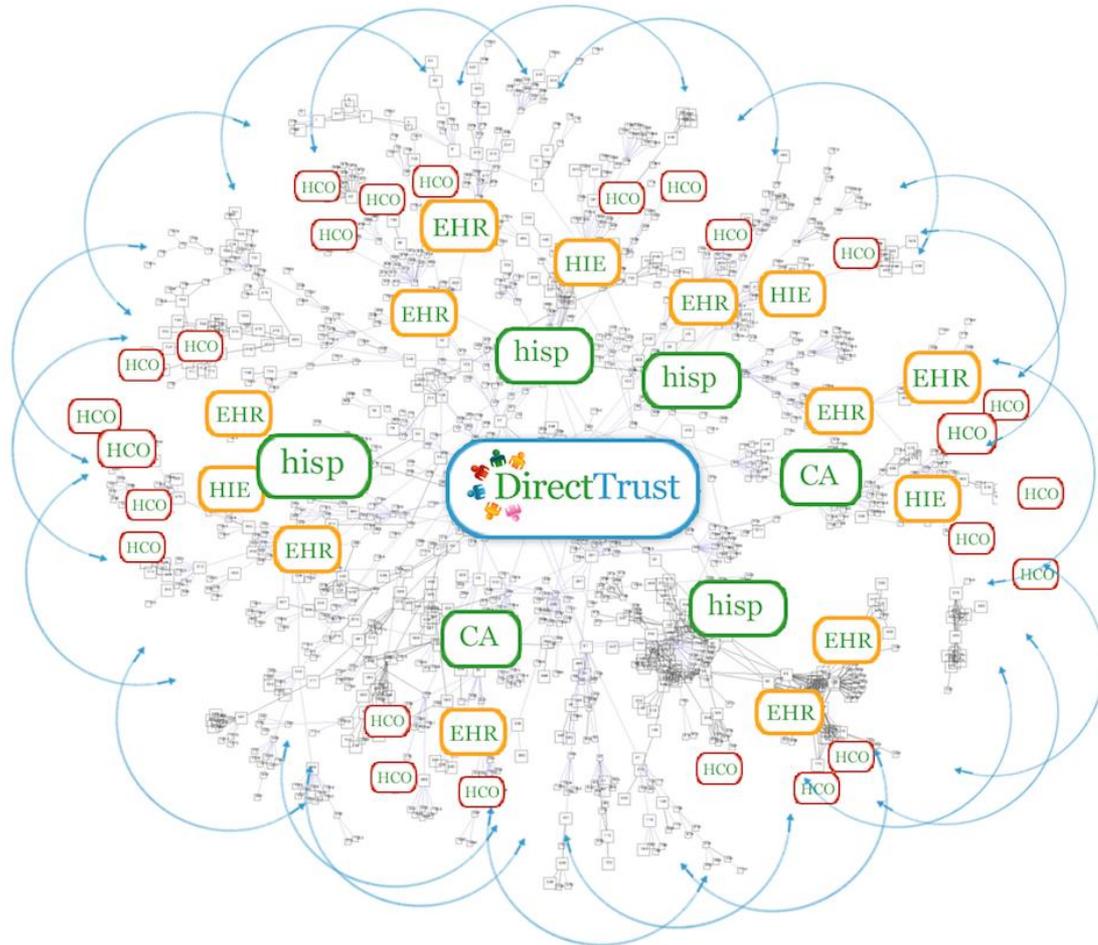
# An Overview and Learnings from the DirectTrust Provider Directory Aggregation Service

presented at  
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# Background and Overview

## Direct Exchange and DirectTrust



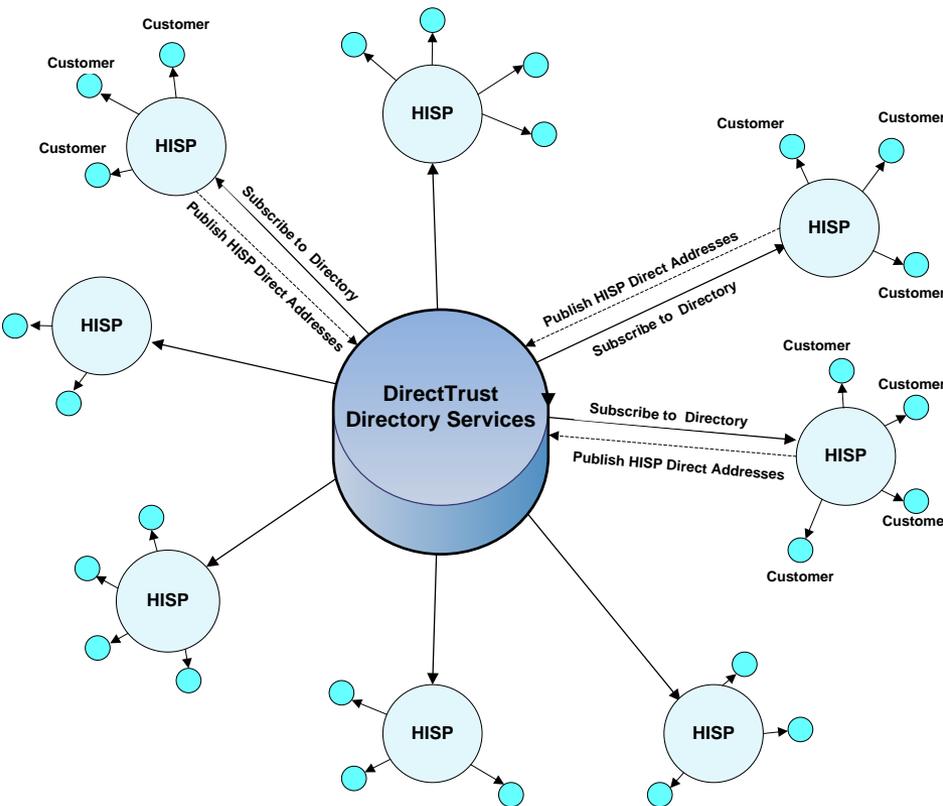
### The DirectTrust Network

- 40 HISPs, 17 RA/Cas
- 300+ Direct-enabled, ONC certified EHRs & PHRs
- 52,000 health care organizations
- 50+ HIEs in 20 states
- 5 Federal Agencies
- 1.1 million Direct addresses
- 45 million transactions in 2015
- Estimated 200 million in 2016
- Replacing fax, courier, mail for transport of PHI data and info

# Provider Directory Data Aggregation Pilot started May 2015, in transition to early production May 2016



DirectTrust Directory Services Architecture



DirectTrust recognized the need for a member Provider Directory Aggregation Service to advance adoption of Direct

Participation is voluntary and open to all DirectTrust accredited HISPs for use by them and their customers

Single Provider Directory Data Sharing Agreement to publish and subscribe with multiple trading partners, eliminating the need for one-off agreements and data feeds, assuring privacy of data, no spamming, etc.

Pilot started as a proof of concept – testing technology and design – keep it simple!

Policy and governance are defined by member consensus

- As of April 5, 2016, there were
  - 345,002 ID proofed Direct Addresses in the Directory
  - 400,000+ expected by end of June, 2016
  - 9 HISPs actively participating
  - 6 HISPs in process of onboarding
  - 3 HISPs evaluating onboarding process
  - Approximately 200 EHRs and HIEs contracted with these HISPs who are able to upload the information
- Simple “white pages” data model
- Each HISP is responsible for curating the Provider Data it contributes
- DirectTrust provides edit checks to ensure format

## Some lessons learned...



- Simple works.
- HISPs, EHRs PHRs, and HCOs are often very worried about release of Direct addresses to third parties, which might encourage junk mail, spamming, unrequested messages
- As use of Direct grows, so does the demand for basic provider directory information, not only in private sector but for federal agencies
- Thus, there is a tension and “trade-off” between access, reliability, currency, curation of the data and its allowed and prohibited uses
- No one wants to pay for directory services! (or not much, anyway)
- Will there be increased demand for additional data model components?



- Mutual TLS is used to provide system security
- Participating HISPs upload their Direct Addresses in a CSV File
- Two Interfaces are supported – Interactive and RESTful API
- HISPs upload their data and download aggregated Directory
  - HISPs must contribute by uploading their data to participate
- Edit Checking Verification Reports available for uploads
  - As file is uploaded the file is checked for compliance with format. A report of the edit check process is available for download to the HISP

# Contact Information



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